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	Substitute for form 1449A/P	то	Complete if Known		
		. •	Application Number		
	INFORMATIC	N DISCLOSURE	Filing Date		
STATEMENT BY APPLICANT			First Named Inventor	May, Wanda J.	
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	llien se mony	sheets as necessary)	Examiner Name		
	neet 1	of 1	Attorney Docket Number	09999-0603-MAY	

			U. S. PATENT	DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (I known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Unes, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	AL	Data Considered	6/24/04

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